

**This Form is for INTERNAL PTO USE ONLY**  
**It does NOT get mailed to the applicant.**

**NOTICE OF FILING / CLAIM FEE(S) DUE**  
**(CALCULATION SHEET)**

**APPLICATION NUMBER:** 09753083

**Total Fee Calculation**

	<u>Fee Code</u>	<u>Total # Claims</u>	<u>Number Extra</u>	<u>X</u>	<u>Fee</u>	<u>Fee</u>
	<u>Sm./Lg.</u>				<u>Sm. Entity</u>	<u>Lg. Entity</u>
Basic Filing Fee	<u>201/101</u>					<u>710.00</u>
Total Claims >20	<u>203/103</u>	<u>30</u>	<u>-20 =</u>	<u>10</u>	<u>x 18</u>	<u>180.00</u>
Independent Claims >3	<u>202/102</u>	<u>4</u>	<u>-3 =</u>	<u>1</u>	<u>x 80</u>	<u>80.00</u>
Mult. Dep Claim Present	<u>204/104</u>					<u>0.00</u>
Surcharge	<u>205/105</u>					<u>130.00</u>
English Translation	<u>139</u>					

**TOTAL FEE CALCULATION**

**Fees due upon filing the application:**

**Total Filing Fees Due =** \$ 1100.00

**Less Filing Fees Submitted -** \$ 0.00

**BALANCE DUE =** \$ 1100.00